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Atty Docket No. 015258-053700US

PTO FAX NO.: 703-872-9311

ATTENTION: Examiner David Sorkin
TELEPHONE NO.: 703-308-1121

OFFICIAL

Group Art Unit 1723

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER DAVID SORKIN

CERTIFICATION OF FACSIMILE TRANSMISSION

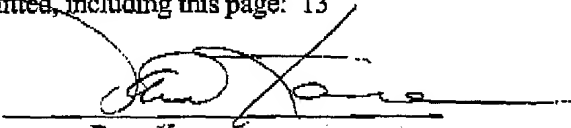
I hereby certify that the following document(s) in re Application of RETO SCHOEB, Application No. 09/912,695, filed July 23, 2001 for A MAGNETIC STIRRING APPARATUS AND AN AGITATING DEVICE is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Document(s) Attached

1. Petition for One Month Extension of Time SB/22 with fee authorization; and
2. Amendment Under 37 CFR 1.116 Expedited Procedure Examining Group 1723.

Number of pages being transmitted, including this page: 13

Dated: 10/02/2003


Dana Kane

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PTO/SB/22 (08-03)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 015258-053700US
In re Application of RETO SCHOEB		
Application Number 09/912,695		Filed July 23, 2001
For A MAGNETIC STIRRING APPARATUS AND AN AGITATING DEVICE		
Art Unit 1723		Examiner David Sorkin

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.. Registration Number 24,168

☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

10/02/2003
Date

William Michael Hynes
Signature

William Michael Hynes, Reg. No. 24,168
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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